FEC FORM 1

## STATEMENT OF ORGANIZATION

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2014 MAR -4 PM 12: 55

FORM 1		Ondai	1127111	ON		FEC. MAIL, CENTER
1. NAME OF COMMITTEE (in	n full)	(Check if nar is changed)		ample:If typing, type er the lines.	12FE4M	
BOB MAR	ŞḤẠĻĻ	FOR CON	IGRES	S	<u> </u>	
	1.1.1.1.1	7020 \4/1 \	OM D		<u> </u>	
ADDRESS (number a	nd street)	7930 WILL	OW P	OND COUR	( <u> </u>	
(Check if address is changed)		MANASSA	<b>\S</b>		~~VA	20111
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MA	AL ADDRESS	(Please provide only	one e-mail a	ddress)		
(Check if	addross	<u> MARY.LA</u>	ĻĻI@R	OSESERVI	CESLL(	C,CQ
is change		LIIII				
COMMITTEE'S WEB PAGE ADDRESS (URL)						
(Check if is change						
2. DATE 02" 15° 12014"						
3. FEC IDENTIFICATION NUMBER						
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)						
I certify that I have o	examined this	Statement and to th	e best of my	knowledge and belief	it is true, corre	ct and complete.
Type or Print Name	of Treasurer	MARY RO	DSE LA	ALLI		
Signature of Treasure	er <i>24</i>	uy Rose o	Ealli .		Date 02	2 / 15 / 2014
NOTE: Submission of				ubject vindeperson signing		to the penalties of 2 U.S.C. §437g.
Office Use Only				For further information Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)